

Code of Business Conduct



Unlock the Power of

“A System of Integrity”



Carolinas HealthCare System

Uncompromising Excellence. Commitment to Care.

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Dear Colleague:

As you know, Carolinas HealthCare System has been experiencing a period of sustained growth, accompanied by new partnerships that have brought a significant number of new facilities under the CHS banner. This growth has provided numerous opportunities to extend the CHS brand, and its attendant reputation for quality, into new communities throughout the Carolinas.

It is important to remember that CHS's reputation for quality stems not only from great medical care but also from the integrity of our business practices. In short, our core values dictate not only high standards of care for the people we serve, but a resolute commitment to legal and ethical conduct. The specific code of conduct that defines our culture of compliance and ethics is called *A System of Integrity*.

I hope that you will take the time necessary to review and absorb the information contained in this booklet, so that you will understand what is expected of every CHS employee. Feel free to keep it close at hand, so that you can refer to it easily should you ever have a question or need guidance.

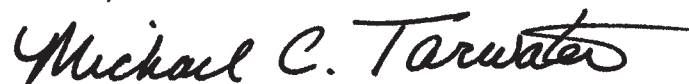
The most important part of any compliance effort is not the rules but the people who take them to heart. Each of us has a personal responsibility to ensure that business practices are conducted in a manner that reflects the highest standards of honesty and integrity. If you become aware of any situation that might represent a conflict with *A System of Integrity*, or that might violate applicable laws or regulatory requirements, you should report it without delay.

You may report your concerns to your supervisor, notify the corporate compliance office, or call the Compliance HelpLine (1-888-540-7247). When calling the HelpLine you may choose to remain anonymous. Company policy bars retaliation against any employee who makes a good faith effort to report compliance concerns.

To summarize, an enterprise like ours cannot thrive if it does not inspire the confidence of patients, vendors, third party payers, government oversight agencies and numerous other important constituents. Your personal commitment is vital to that effort so that we can sustain the mission of providing excellent healthcare to all the communities we serve.

Thank you for all that you do for Carolinas HealthCare System.

Sincerely,



Chief Executive Officer

CHS MISSION

We are dedicated to creating and operating a comprehensive system to provide healthcare and related services, including education and research opportunities, for the benefit of the people we serve.

CHS VISION STATEMENT

As the Carolinas' premier healthcare provider, Carolinas HealthCare System will be chosen by consumers and physicians for high-quality and cost effective health services.

Carolinas HealthCare System (the "System" and "CHS") recognizes that its employees are its greatest assets. For this reason, the System is committed to selecting and hiring well-qualified, service-minded people who will make the right decisions when faced with difficult situations. Employees should reflect the System's values to the communities it serves. It is the System's goal to be known to all communities for its commitment to quality through caring employees working together as a team in an environment of integrity.

The System is a dynamic and growing organization, and the environment in which it operates is one of increasing complexity. It is necessary for our employees to make many decisions every day, and making the right decision is not always easy.

The CHS Vision Statement, Major Goals and Core Values provide the foundation for the System's standards of business conduct. As a result, it is important for each employee of the System to be familiar with these beliefs, which are listed below, to help them in making the right decisions.

CHS Major Goals

- Customer Service – to treat every patient, family member, physician, visitor and vendor with dignity, respect and compassion and exceed their expectations for care, comfort and service
- Quality – to optimize the management of clinical resources and achieve high levels of patient safety, clinical quality and cost effective care
- Growth – to focus on and develop purposeful, patient-centered opportunities to achieve growth, so long as they advance the mission of the System

- Financial Viability/Operational Excellence – to secure the System's financial viability by capitalizing on internal opportunities to achieve superior operating performance
- Community Benefit – to promote healthy living and wellness across the community we serve and provide appropriate levels of charity care, medical education and research commensurate with our resources and the community's needs
- Employee Satisfaction – to attract, engage and retain committed, competent and caring health care professionals and create an environment where team members respect and support each other

CHS Core Values

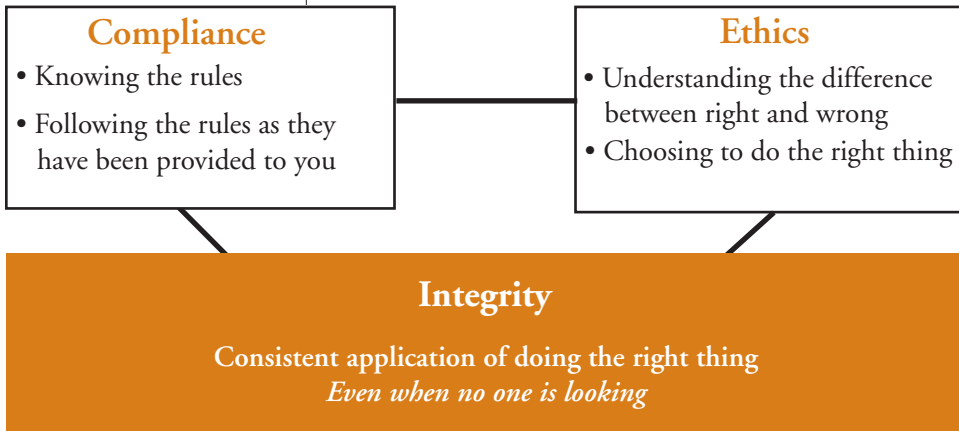
CHS has identified four core values successful employees need to strive for in order for us to accomplish our mission.

- Commitment – We are dedicated to CHS, taking pride in our organization and our jobs, protecting a professional image, and striving to be the best in all we do
- Caring – We treat our customers with dignity, giving them the courtesy and gentleness they need. We are helpful, we listen, we communicate and we respond to patient needs
- Teamwork – Linked by our common mission, we respect the professionalism and contributions of our co-workers, understand that physicians are an integral part of the team, value diversity in all its forms, and recognize that people are our greatest assets
- Integrity – We honor and uphold confidentiality, are honest and ethical, keep our commitments, accept responsibility for our actions, and respect the rights of patients, families and each other

The information contained in this booklet, *A System of Integrity*, defines the basic expectations that are a part of our standards of business conduct, which are the personal and professional behaviors that all employees should follow. It is impossible to create a code of conduct that will address every situation an employee may encounter during his or her career with the System. When faced with a difficult situation, however, every employee should stop and determine the best response using the standards of conduct outlined in this booklet and upheld by the System.

Defining the CHS Culture of Compliance, Ethics and Integrity

It is important for employees to understand the interrelationship between the three concepts of Compliance, Ethics, and Integrity:



Our Code of Conduct is called *A System of Integrity* and will serve as a quick reference for many of our compliance policies.

The CHS Corporate Compliance Program

Our Compliance Program provides a comprehensive, well-structured system for monitoring ourselves in a complex industry with numerous rules and regulations enforced by multiple federal, state and private agencies. It is specifically designed to detect, prevent and correct any violations of law or company policies.

The Program works directly with CHS Senior Leadership and the governing authority to help maintain proper oversight, sufficient funding and regular reporting of issues.

ASK YOURSELF...

- Do I always treat patients with respect and dignity?
- Am I careful not to let my personal feelings or circumstances interfere with patient care?
- Do I respect the privacy rights of our patients?
- Do I protect the confidentiality of patient medical and financial information?

The System is committed to delivering quality care, products and services to its patients in a compassionate, respectful, and efficient manner. Patients will be treated with dignity and respect at all times. The System will provide each patient with information regarding his/her rights and responsibilities and will strive to protect those rights throughout care and treatment.

- Patients are entitled to prompt and courteous responses to their requests and to their need for treatment and services
- Patients have the right to participate in and make their own healthcare decisions after being informed of all relevant information, such as their diagnosis, prognosis, and the benefits and risks of available treatment alternatives
- Patients can refuse medical treatment, to the extent permitted by law, after being informed of the medical consequences of such refusal
- Patients have a right to personal privacy
- Patients' medical and financial information must be kept strictly confidential, as required by law

ASK YOURSELF...

- Do I limit access to the patient's medical record to the medical team involved in care?
- Do I get the patient's consent prior to sharing patient information with others who do not have a job related need to know? Do I document this consent in the patient's record?
- Do I obtain or verify written authorization prior to releasing information?
- Do I avoid discussion of patient information in public areas, on mobile phones and in electronic mail messages?
- Am I careful not to leave patient files, reports or other information in areas that could be viewed by the public or by someone who does not have a need to see it?
- Do I respect the privacy of my fellow employees?
- Do I keep my computer password(s) confidential?

Consistent with HIPAA (Health Insurance Portability and Accountability Act), members of the workforce (employees, physicians, students, volunteers, etc.) will protect the confidentiality and security of patient information.

Other types of business information should also be treated confidentially, such as employment and financial information. Any information learned or created by CHS employees must be treated confidentially, even after termination of employment.

HIPAA permits the use of patient information for treatment, payment and healthcare operations. Workforce members may have access to patient information solely to perform their job duties. Accessing patient information or any other type of confidential information for non-job related or personal use is strictly prohibited.

We respect and maintain the confidentiality of:

- Patient records (client identity, diagnosis, treatment, financial, psychosocial and other personal or family information) because they are the property of CHS
- Personnel information, such as employee salaries, benefits and disciplinary actions
- Financial, marketing, planning and other types of business information

ASK YOURSELF...

- Do I consistently respect the rights of those with whom I work?
- Am I careful not to let differences in beliefs or backgrounds affect the work environment?
- Do I treat others the way I wish to be treated?
- Do I tell jokes or make comments that have sexual, ethnic or other inappropriate overtones?

The System is committed to providing a work environment that respects the rights, dignity and cultural differences of its employees, contractors and agents. Harassment or abuse of any form (i.e. physical, mental or verbal) is inappropriate and will not be tolerated.

The System is committed to fair and lawful human resources policies and practices in recruiting, hiring, evaluating, training, discipline, career development, compensation, promotion and termination. Discrimination or harassment of any sort, against any employee or applicant for employment, because of age, race, religion, sex, disability, national origin or Vietnam-era status will not be tolerated.

If you have any questions or concerns about the System's policies on workplace behavior or equal employment opportunity, please talk to your supervisor or contact Human Resources.



ASK YOURSELF...

- Do I ensure that my relationship with a competitor or supplier does not influence how I perform my job duties?
- Do I refrain from using business supplies and equipment for personal use?
- Do I make sure that my family members are not involved in another business activity that might interfere with how I perform my duties as a System employee?
- Do I refrain from using System data or property for personal gain?
- Do I disclose any business relationship that may be a conflict of interest to my supervisor or the Corporate Compliance Department?

A conflict of interest occurs when a relationship, influence or activity impairs, or even gives the appearance of impairing, one's ability to make objective and fair decisions in the performance of his/her job. In other words, you should not place yourself in any situation that might force you to put your personal or financial interests ahead of the interests of the System. In certain instances, conflicts of interest may arise despite your best efforts to avoid them. If such a situation arises, you should promptly and fully disclose it to your supervisor or the Corporate Compliance Department.

The following are examples in which a conflict of interest may exist:

- Employment by a competitor or potential competitor while employed by the System
- Direct or indirect ownership of, or substantial interest in, a company that is a competitor or a supplier of goods and services to the System (See Business Courtesies, Gifts and Customer/Supplier Relations, page 12)
- Acceptance of gifts, payments or services from those doing business, or seeking to do business, with the System
- Serving as a director, officer, consultant or other key role with a company doing (or seeking to do) business with or competing with the System
- Hiring or contracting with a family member or friends to provide goods and/or services to the System
- Any business or financial interest or relationship you, or a member of your family, have that might appear to influence your ability to meet your obligations to the System

The System deals with many suppliers. It is our policy to select suppliers on the basis of factors such as price, quality, performance, customer service assistance and reputation.

The System does not conduct business through the improper use of business courtesies, gifts or relationships. It is against the law, and System policy, to give or receive any “remuneration” either in return for or to induce: (a) a patient referral or (b) the purchase or lease of a service or item. Remuneration is defined as anything of economic value, including kickbacks, bribes and rebates (whether in cash or in-kind). Even the opportunity to earn money may be considered remuneration. You should not accept nor solicit any benefit from an existing or potential supplier that might compromise, or appear to compromise, your objective assessment of the supplier’s products or services.

You should refrain from requiring a supplier to give up trade with our competitors or to purchase our products or services in order to obtain, or retain, their supply agreement with us. You must also respect and protect any confidential or proprietary information shared with you by a supplier.

Finally, you may not solicit or use your position with the System to obtain a special discount or other favorable treatment (e.g. free gift) for yourself or others not extended by the supplier to all System employees.

This policy is not intended to prohibit the acceptance or giving of common, non-cash courtesies, provided that: (a) the value of the gratuity is nominal in relation to the circumstances in which it was offered and accepted; and

ASK YOURSELF...

- Do I make sure that I do not solicit gifts?
- Do I always follow purchasing policies?
- Do I avoid accepting lavish gifts or entertainment from customers or suppliers?
- If I receive a gift from a vendor, do I ensure that the gift is of nominal value and does not influence how I perform my job?
- Do I ensure that I request reimbursement only for normal, out-of-pocket expenses incurred when serving as a speaker or member of an advisory board?
- Do I refrain from offering gifts or courtesies to suppliers or customers with the understanding or intent to give or receive business in return?
- Do I always reject any offer of cash or cash-equivalent (e.g. gift card, check) from a supplier?
- Do I contact my supervisor or the Corporate Compliance Department when I am not sure if I can keep a particular gift that I have been offered?

(b) it is not intended to influence a business transaction or an employee’s performance of job duties. Examples of acceptable gifts and gratuities include:

- An unsolicited, non-cash gratuity such as food and refreshments of reasonable value
- Invitations to participate in events or activities that facilitate business relationships
- Unsolicited advertising or promotional material, such as a pen, calendar, paperweight or other small item of nominal value
- An unsolicited gift of appropriate value from a patient when it is clear that the motivation for the gift is to thank the employee for providing excellent customer service
- Bonafide reimbursement for normal out-of-pocket expenses incurred when serving as a speaker or a member of an advisory board
- Non-routine meals paid for by a supplier that occur in the normal course of a business discussion or educational session

Employees must disclose offers of gifts or gratuities to their supervisor or the Corporate Compliance Department. Because every business situation is unique, offers of gifts or gratuities may require review by Corporate Compliance to determine if acceptance of the gift or gratuity is appropriate.

ASK YOURSELF...

- Do I refrain from relationships with competitors that may suggest collusion or improper competition?
- Do I keep price or market information confidential?
- Do I keep financial and operating information confidential?
- Do I keep the trade secrets, patents, trademarks, inventions and devices of the System confidential?

The System competes aggressively in an ethical and legitimate manner. It avoids all actions that are anti-competitive or otherwise conflict with laws that govern competitive practices in the marketplace. Unlawful practices include:

- Agreements with a competitor(s) or to divide territories or customer lists
- Any other arrangement with a competitor(s) that artificially raises the price of services or improperly reduces competition

Never discuss or disclose price or market information with/to someone from another company unless you first consult with the System's legal counsel.

ASK YOURSELF...

- When I see an unsafe situation or act, do I take appropriate action to report or correct the situation?
- Do I avoid the possibility of reporting to work under the influence of alcohol or drugs that may impair my job performance?
- Do I handle biohazardous materials according to policy?



The System seeks to provide a healthy and safe workplace for its employees. Supervisors are responsible for ensuring that all employees are properly trained in health and safety practices and precautions.

The System is committed to taking all reasonable steps to minimize the use and discharge of hazardous substances. The System complies, at a minimum, with legal standards and establishes its own standards where regulations are inadequate or do not exist.

The System has an obligation to its patients, and to the people of its communities, to ensure that employees are fit for duty when they report for work. For this reason, the illegal use, sale or transfer of drugs is not permitted. In addition, you should not possess or drink alcoholic beverages in the workplace or report to work under the influence of alcohol. A violation in this area will be dealt with in a fair and consistent manner in accordance with our Drug and Alcohol Policy.

ASK YOURSELF...

- Am I careful to use or share non-public information only for System-approved business purposes and not for my own personal use?
- Do I refrain from making copies of software for personal or professional use?
- Do I use System equipment or medical supplies, such as office supplies or scrubs, only for approved business purposes?
- Do I understand and abide by the Acceptable Use Policy?

System assets, which are assigned or made available to employees, may be used only for authorized business purposes. Any other use, such as for after-hours charitable work, must receive prior approval from your supervisor.

Those of us who are given custody of System equipment or other assets are expected to understand the proper use and maintenance. All System assets in the custody of an employee are to be returned in acceptable condition upon request or when the employee leaves the System.

Employees are granted access to computer systems and software on a “need to know” basis in order to perform their assigned job duties. Employees must maintain the confidentiality of all passwords and access codes.

The System intends to fully comply with all copyright and software licensing laws.

There will be one licensed copy of software system disks and documentation for each software program. An employee may not make copies of computer software programs for personal or professional use. Doing so could be a violation of federal copyright laws.



ASK YOURSELF...

- Do I ensure all accounting & other financial records are correct & complete?
- Am I accurate in my timekeeping?
- Am I honest in filling out expense reports?
- Do I report any questionable business transactions to my supervisor or to the Corporate Compliance Department?

All System records shall be prepared accurately, reliably, honestly and in accordance with established finance and accounting procedures. An employee must not enter false or misleading information into System records and must report to management any transaction they feel is questionable.

Entries of cost, financial or similar business information shall be made only to the regularly maintained books and records of the System. No “off the books” transactions will be tolerated.

The System maintains a system of administrative and accounting controls to:

- (a) safeguard its assets;
- (b) check the accuracy and reliability of its accounting data;
- (c) promote operational efficiency; and
- (d) encourage compliance with laws and regulations.

All of us are responsible for proper accounting and for adherence to control procedures so that errors or irregularities are avoided or are identified and corrected in a timely manner.

All records should be stored in a safe and secure location for the period of time required by law or System policy, whichever is longer. Records should be organized in a manner which permits prompt retrieval. Old or unneeded records, either in electronic or paper form, should be properly disposed of or purged with the proper knowledge of management and in accordance with applicable document retention schedules. An employee should never destroy or alter any document in anticipation of, or in response to, a request for those documents by any government agency or court.

ASK YOURSELF...

- Are all bills for services supported by clinical documentation?
- Does the clinical documentation support the necessity for and the level of services provided?
- Do I refrain from altering bills in any way in an attempt to avoid third party edits or denials?
- If I am ever instructed to process a bill in a way that is contrary to my understanding of third party rules or regulations, do I request further information to avoid improper billing?
- If I am ever asked to change a code or bill in order to increase reimbursement, especially when I believe another code with a lower reimbursement is more appropriate, do I request further information to avoid improper billing?

The System bills only for care and services that it provides which are properly authorized and documented as medically necessary - nothing less and nothing more. The System will not tolerate anyone misrepresenting the services, supplies and equipment furnished, or the extent of services, supplies and equipment rendered, in order to circumvent coverage limitations or to increase payments from third parties. We will take every reasonable precaution to ensure that our billing and coding work is accurate, timely and in compliance with System policies and with federal and state laws and regulations. Contacts made to obtain missing information must be properly and fully documented.

If you work in a billing or coding-related area, you are expected to understand and comply with all billing and coding policies and procedures established by the System and by third-party payers (including Medicare and Medicaid).

It is the System's policy to refund any overpayments made as a result of billing errors.

Certain government regulations and many insurance payer contracts require that patients pay co-insurance, co-payments and deductibles. Because of this, the practice of routinely writing off co-insurance, co-payments and deductibles violates legal and contractual obligations and is, therefore, prohibited.

ASK YOURSELF...

- Am I familiar with all of the CHS Corporate Compliance Policies?
- Do I contact my supervisor, my Facility Compliance Director or Corporate Compliance Department immediately when I have compliance questions or concerns?

It is against the law for a health care provider to submit fraudulent or false claims for payment to programs that are funded by federal or state governments, such as Medicare and Medicaid.

The Federal False Claims Act outlines penalties for individuals or entities who knowingly submit a false claim, or cause another individual or entity to submit a false claim, for payment or approval by the U.S. government. The states of North Carolina and South Carolina also have false claims laws.

Employees are required to report known or suspected false claims violations immediately. Employees can make reports to supervisors, their Facility Compliance Director, the Corporate Compliance Department, or the Compliance HelpLine.

Employees who report suspected violations are protected by CHS policy from any type of retribution or retaliatory acts. Employees who choose to report a false claim to the federal or state government are entitled to whistleblower protections, including protection from retribution or retaliation by the employer.

Please refer to the CHS Administrative Policy Manual for all Corporate Compliance policies and procedures established by the CHS Compliance Program to prevent and identify suspected false claims and other types of fraud, waste and abuse.

ASK YOURSELF...

- If I know of situations where patients are not given adequate choice with regard to home care, do I report the situation to my supervisor?

Only those patients who need and will benefit from the services the System provides will be admitted/accepted for care and treatment. Standard clinical admission criteria that include medical necessity guidelines are used to determine whether or not an individual is admitted.

As a matter of policy, the System does not waive insurance co-payments or deductibles or otherwise provide benefits to patients to obtain admissions. Under certain circumstances, the System may provide appropriate financial accommodation (such as allowing monthly payments over time) to patients based on their financial need.

The System does not pay bonuses of any type to any employee, or other individuals working in the admissions process, based on the number of patients admitted or the length of the patients' stays.

Each patient is treated as an individual. Medical professionals develop treatment plans to meet the specific clinical needs of every patient utilizing a multi-disciplinary approach. Treatment is provided in the least restrictive environment that is appropriate to the individual patient's needs.

Discharge planning begins at the time of admission and continues throughout the treatment process. The patient, the patient's family and loved ones and the clinical team are all involved in the discharge planning process. Patients are discharged with an aftercare or follow-up plan including interface with community organizations and support groups whenever needed. In cases where care is needed in the home, the System, in accordance with federal laws and regulations, does not require patients to utilize System-owned or operated home health agencies.

ASK YOURSELF...

- Am I careful not to request reimbursement from the System through an expense report or other means that could be construed as a direct or indirect political contribution?
- Does the System strive not to distribute any written material that either directly or indirectly endorses a specific political party or candidate?
- Am I careful not to express my political or religious views in the workplace in such a way that co-workers or subordinates could feel intimidated or harassed if they don't agree?

The System strives to be a good corporate neighbor to the communities it serves.

You are encouraged to participate, as a private citizen, in the political process and as an advocate for religious and charitable organizations, so long as your participation does not: (a) interfere with the satisfactory performance of your official duties; (b) bring discredit or embarrassment to the System; or (c) create a conflict of interest.

No System funds, equipment, facilities or assets may be used to support a political party, candidate, holder of any government position or any community organization without appropriate senior management approval.



ASK YOURSELF...

- Am I honest and forthright in my dealings with government officials and regulatory agencies?
- Do I appropriately seek advice from my supervisor, Corporate Compliance or the Office of General Counsel before dealing with government agencies?
- Do I verify that I have contracting authority and seek advice from the Office of General Counsel before entering into contracts on behalf of the System?

Dealing with government officials is not the same as dealing with private parties. This is true whether the government is acting as a customer, payor, supplier or regulator. Always secure advice from the Office of General Counsel before entering into a contract with a government entity.

Do not give anything of value (such as a gift, hospitality, or entertainment) that is not allowed by the government's policy to an employee of a federal, state, or local agency.

Under the direction of Corporate Compliance and the Office of General Counsel, the System will cooperate with requests for information from government auditors, investigators or other officials. Any written documents, such as search warrants or subpoenas, should be immediately brought to the attention of the Office of General Counsel before any response is made.

An employee who is contacted by a government agent in connection with an investigation or request for documents should immediately:

1. Write down the agent's name and the name of the agency
2. Notify the supervisor who will then contact the Administrator on Call, Corporate Compliance Department and the Office of General Counsel
3. If the agent has a legal document (search warrant or subpoena), request a copy
4. Maintain a written inventory of any documents taken by the agent

Never do the following:

- Destroy or alter any record requested by a government agency or court
- Provide misleading or untruthful information to a government agent or persuade anyone else to do so

ASK YOURSELF...

- Do I verify the accuracy of information before providing it to others for use in marketing?
- Am I careful not to discuss hospital business with members of the media unless directed to do so by the Public Information and Marketing Department?
- Am I aware of, and do I adhere to, my facility's policy for the release of patient information to the news media?
- Do I make sure any employees under my direct supervision are aware of, and follow, my facility's policy for the release of patient information to the news media?

All System advertising must be truthful and not misleading. Any claims about the System's services must be clearly supported by evidence to substantiate the claims made. All price advertising must accurately reflect the true charges for services.

The System does not use advertisements or marketing programs that may cause confusion between our services and those of our competitors. False or misleading representations should not be made.

Because of the nature of our industry, we frequently receive requests from the media for information such as patient conditions or interviews with staff members, visitors or patients. All media requests should be handled in accordance with your facility's policy for media inquiries. We recognize that the unapproved release of sensitive information could have a negative effect on the customers we serve, as well as the System's reputation and interests.

The System needs your help in order to follow the principles described in this booklet.

We are responsible, as an organization and as individuals, for acting in an ethical and legal manner. If you are involved in a situation that is not covered in *A System of Integrity* and you need additional guidance or direction, you should follow the Chain of Command by seeking the advice of your supervisor or the various policies and procedures manuals of the System and its member organizations. You may also contact your facility's Human Resources or Facility Compliance Director. If you are unable to seek, or are uncomfortable when seeking, guidance from these sources, you should ask for assistance from CHS Human Resources, the Office of General Counsel or Corporate Compliance. The Chain of Command is highlighted on the back of this book.

Because ethical behavior and compliance with laws and regulations are important, the System has also established a Compliance HelpLine. The Compliance HelpLine is available to any employee who has a question or concern about a compliance, legal, or ethical question. Also, the HelpLine is available to employees who observe violations of the standards of conduct described in this booklet or other violations of laws and regulations. The System wants to make it clear that you can raise these concerns without any fear that you will be disciplined or terminated for doing the right thing. We only ask that you tell the truth as you understand it.

If you contact the HelpLine, you may ask your questions or report suspected unethical or illegal acts without giving your name should you wish to remain anonymous. An additional feature of the HelpLine service is a confidential Post Office Box that will be provided to any individual who calls the HelpLine and prefers to make their report in writing.

The HelpLine is run by an independent contractor and is available to all employees, seven days a week, 24 hours a day. The toll-free number is 888-540-7247. HelpLine calls are forwarded to Corporate Compliance within 24 hours. Emergencies are forwarded immediately. The System will investigate and respond to all HelpLine inquiries. You will be able to follow-up on the status of your inquiry, if you wish. Again, no action will be taken against any employee who, in good faith, reports information to the HelpLine.

It is important to remember that the HelpLine is not intended to replace current System procedures and processes for communicating information and resolving operational conflicts or problems. For example, you should continue to use your facility's policies and established procedures for resolving issues such as employee grievances and risk management concerns.

Many individuals and organizations that are not employed by the System work closely with us as board members, agents, independent contractors, students, medical professionals and specialists, volunteers and business partners. Each of these groups is expected to honor and abide by *A System of Integrity* and other corporate policies while working in any System facility or conducting business with, or on behalf of, the System. It is acceptable to the System for these parties to have their own codes of conduct that they may follow, as long as their codes do not conflict with *A System of Integrity*.



The System provides training to all employees and other appropriate parties regarding *A System of Integrity* and the Compliance HelpLine. In addition, many employees will receive specialized training on subjects such as billing, coding, safety and environmental issues and employment regulations that relate specifically to their jobs. To measure the effectiveness of the Compliance Program and compliance education and training, the System also conducts ongoing audits of these and many other important subject areas.

The Compliance Program and its related training initiatives are effective only if each employee participates. Managers are responsible for making sure their employees complete the annual continuing education module on Corporate Compliance, attend any additional compliance training as needed and actively participate in any audits for which their assistance is requested. Remember, each employee is the Carolinas HealthCare System to our patients, our business partners and the communities we serve. Let's make sure that we maintain *A System of Integrity*.

Getting Help

Using the Carolinas HealthCare System Chain of Command

If you would like to report a potential compliance issue,

Talk with your supervisor,

If the issue concerns your supervisor, or if you are uncomfortable discussing it with your supervisor,

Talk with your supervisor's supervisor.

If you are uncomfortable discussing it with your supervisor's supervisor, contact:

For Human Resource Issues:

Your facility's Human Resources Department

The appropriate regional HR office

For Compliance Issues:

Your facility's Compliance Director

The CHS HelpLine or the Corporate Compliance Department

Chief Compliance Officer
Carolinas HealthCare System

Corporate Compliance
704-512-5900

Compliance HelpLine
888-540-7247



Carolinas HealthCare System

Uncompromising Excellence. Commitment to Care.